



Newport Infant School

Asthma Policy Statement

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Newport Infant School Asthma Policy Statement

- This school is an inclusive community that aims to support and welcome pupils with asthma
- This school ensures that the whole school environment, which includes physical, social, sporting and educational activities, is inclusive and favourable to pupils with asthma
- The school's asthma policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings
- The school ensures all staff understand their duty of care to children and young people in the event of an emergency. All staff feels confident in knowing what to do in an emergency. All school staff receives annual asthma awareness training
- This school has clear guidance on the administration of medicines at school
- This school has clear guidance on the storage of medicines at school
- This school has clear guidance about record keeping
- Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical condition policy. The asthma policy is regularly reviewed evaluated and updated. Updates occur every year

Policy Guidelines

This school is an inclusive community that aims to support and welcome pupils with asthma

Pupils with asthma are encouraged to take control of their condition .

Pupils feel confident in the support they receive from the school to help them do this.

Pupils with asthma are included in all school activities.

All staff feel confident in knowing what to do in an emergency.

The school asthma policy is understood and supported by the whole school and local health community.

This school ensures that the whole school environment, which includes physical, social, sporting and educational activities, is inclusive and favourable to pupils with asthma

This school is committed to providing pupils with a physical environment, which is accessible to pupils with asthma.

This school's commitment to an accessible physical environment includes out of school visits and the school ensures these visits are accessible to all pupils.

This school ensures the needs of children and young people with asthma are adequately considered to ensure they have full access to extended school activities such as school discos, school productions, after school clubs and residential visits.

All staff at this school are aware of the potential social problems that pupils with asthma may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti bullying and behaviour policies.

Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of asthma amongst pupils and to help create a positive social environment.

This school ensures all classroom teachers; PE teachers and sporting coaches understand that pupil's asthma should not be forced to take part in activity if they feel unwell.

This school ensures all PE teachers, classroom teachers and school sport coaches are aware of the potential triggers for pupil's asthma when exercising and tips to minimise these triggers.

This school ensures all pupils have the appropriate medicines with them during physical activity and that pupils take them when needed.

Risk assessments must be carried out for any out of school visit and asthma must be considered during this process. Factors to consider include how routine and emergency medicines will be stored and administered and where help could be obtained in an emergency.

There may be additional medicines, equipment or factors to consider when planning residential visits. These may be in addition to any medicines, facilities and healthcare plans that are normally available in school.

All staff understand asthma and are trained in what to do in an emergency

Staff at this school understand their duty of care to pupils in the event of an emergency.

In an emergency situation school staff are required under common law duty of care, to act like any reasonably prudent parent. This may include administering medicines.

All staff who work with children at this school receive training and know what to do in an emergency for the children in their care with asthma.

The Asthma lead receives training every 2 years and disseminates this annually to all staff. The school has access to support from members of the Asthma team in the local healthcare sector.

This school uses school asthma healthcare plans to inform the appropriate staff (including supply teachers and support staff), of pupils in their care who may need emergency help.

This school has procedures in place for a copy of the pupil's health care plan to be sent to the emergency care setting with the pupil. On occasions when this is not possible, the form is sent or the information on it is communicated to the hospital as soon as possible.

If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The school tries to ensure that the staff member will be one the pupil knows.

The school has clear guidance on the administration of medicines at school; see Medication in School Policy.

Emergency medicines including inhalers and auto injector adrenaline pens.

All pupils at this school with asthma have easy access to their emergency medicines. All staff know where the drugs or medicines are stored and how to gain access. Inhalers are stored in the main reception area in a secure cupboard clearly labelled 'Inhalers'.

All school staff have been informed through training that they are required, under common law duty of care, to act like any reasonably prudent parent. In an emergency situation, this may include taking action such as administering inhalers/auto injector adrenaline pens.

Non-emergency medicine

All staff are aware that there is no legal or contractual duty for any member of staff to administer medicine or supervise a pupil taking medicines unless they have been specifically contracted to do so.

Members of staff who are happy to take on the voluntary role of administering medicines may administer prescribed inhalers to pupils under the age of 16, but only with the written consent of the parent.

Training is given to all staff members who agree to administer emergency medicines to pupils and the Local Education Authority provides full indemnity.

Should the medicine change or be discontinued, or the dose or administration method change, parents will notify the school immediately.

If a pupil refuses their medicine, staff should record this. Parents or carers should be informed as soon as possible.

All staff attending off site visits should be aware of any pupils on the visit with asthma. They should receive information about what to do in an emergency and any other additional support necessary, including any additional medicines or equipment needed.

If a trained member of staff, who is usually responsible for carrying or administering medicine, is not available the school should make alternative arrangements to provide the service. This should be addressed in the risk assessment for the activity.

The school has clear guidance on the storage of medicines at school.

Inhalers are stored in the main reception area in a secure cupboard clearly labelled 'Inhalers'.

Safe storage - emergency medicine:

Emergency medicines are readily available to pupils who require them at all times during the school day or at off site activities.

Pupils, whose healthcare professionals and parents advise the school that their child is not yet able or old enough to self manage and carry their own emergency medicines on them, know exactly where to access their emergency medicines.

Safe storage - general:

All medicines are supplied and stored, wherever possible, in their original containers. All medicines need to be labelled with the pupil's name, the name of the medicine, expiry date and the prescriber's instructions for administration, including dose and frequency.

Medicines are stored in accordance with instructions. For inhalers and emergency adrenaline pens a box is provided by school which has a photograph of the child on the lid along with their name, class and the expiry date of the medication. The box contains the medicine and all equipment needed to administer it along with a copy of healthcare plan and the paperwork to record the administration for both school and home.

All medicines are sent home with pupils at the end of the school term for cleaning and checking. Medicines are not stored in school over Christmas, Easter and Summer holidays.

It is the parent's responsibility to ensure new and in date medicines come into school on the first day of the new academic year. Failure to do so will result in a reminder from school followed by a referral to the local healthcare team who will address the issue directly with the family.

Safe disposal

Parents are asked to collect out of date medicines from school.

If parents do not pick up out of date medicines or at the end of the school year medicines are taken to a local pharmacy for safe disposal.

A named member of staff is responsible for checking the dates of medicines and arranging for the disposal of those that have expired.

This school has clear guidance about record keeping.

Enrolment forms

Parents at this school are asked if their child has any health conditions or health issues on the enrolment form, which is filled out at the start of each school year

Parents of new pupils starting at other times during the year are also asked to provide this information on enrolment forms.

Drawing up School Asthma Health Care Plans

This school uses an adapted School Health Care Plan from "Managing Medicines in Schools and Early Years Settings" guidance to record important details about individual children's medical needs, their triggers, signs, symptoms, medicines.

A school health care plan accompanied by an explanation is sent to all parents of pupils with asthma for completion:

1. at the start of the school year
2. at enrolment
3. when a diagnosis is first communicated to the school

The parents are asked to fill out the pupil's school Asthma Health Care Plan. Parents then return these completed forms to the school. Parents may need to liaise with their child's health care professionals to complete the form.

This school ensures that a relevant member of school staff is available, if required to help complete the health care plan for pupils with particularly complex healthcare needs.

Parents will also be asked to give permission for school to administer their emergency inhalers and auto injector adrenaline pens in the event of a failure of the child's own medication.

School Asthma Register

The school Asthma Health Care Plans are used to create a centralised register of pupils with asthma.

An identified member of staff has responsibility for the register at this school.

The responsible member of staff follows up any of the details on a pupil's Asthma Health Care Plan or if permission for administration of medicines is unclear or incomplete.

Parents at this school are regularly reminded to update their child's Asthma Health Care Plan /Anaphylaxis Care Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse) or their medicines and treatments change

Every pupil with a health care plan at this school has their plan discussed and renewed at least once year.

Parents and pupils at this school are provided with a copy of the pupil's current agreed health care plan.

Health care plans are kept in a secure central location at school.

All members of staff who work with groups of pupils, have access to the health care plans of pupils in their care.

A copy of the health care plan is kept in the child's medication box with their inhaler/pen

When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of (and have access to) the health care plans of pupils in their care.

The school ensures that all staff protect pupil confidentiality.

This school uses the health care plans to:

Inform the appropriate staff and supply teachers about the individual needs of a pupil with a medical condition in their care.

Identify common or important individual pupil triggers at school that bring on symptoms and can cause emergencies.

Ensure that all medicines stored at school are within the expiry date.

Ensure this school's local emergency care facilities have a timely and accurate summary of a pupil's current asthma management and healthcare in the event of an emergency.

Remind parents of pupils with asthma/anaphylaxis to ensure that any medicines kept at school for their child are within their expiry dates.

Consent to administer medicines

All parents of pupils with asthma/anaphylaxis are asked to provide consent on the health care plan giving staff permission to administer medicines in an emergency.

Inhalers are kept in school to relieve the symptoms of asthma and staff are not advised to administer them routinely on a daily basis unless this is prescribed by a health professional. Should this be the case, it is expected that the treatment will have an agreed review date.

Overnight visits require all parents/carers to provide medical details for their child. This provides up to date information to relevant staff and school supervisors about the pupil's current condition and their overall health, to help the pupil manage their condition while they are away including information about medicines not normally

taken during school hours. This information is stored safely by the designated staff member, along with a copy of the pupil's health care plan, for the duration of the visit.

Other record keeping

This school keeps an accurate record of each occasion an individual pupil is given or supervised taking medicines. Details of the supervising staff member, pupil, dose, date and time are recorded. If a pupil refuses to have medicines administered, this is also recorded and parents are informed as soon as possible.

Staff Training - record keeping

This school attends training on asthma every two years.

A log of the asthma training is kept by the school and reviewed every 12 months to ensure all new staff receives training and support via the asthma lead.

Roles and Responsibilities

Each member of the school and health community know their roles and responsibilities in maintaining an effective medical condition policy

This school works in partnership with all interested and relevant parties including the school's governing body, all school staff, school nurses, parents, employers of school staff, healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully. The following roles and responsibilities are used for the asthma policy at this school. These roles are understood and communicated regularly.

This school's employer has a responsibility to:

Ensure the health and safety of their employees (all staff) and anyone else on the premises or taking part in school activities (this includes pupils). This responsibility extends to those staff and others leading activities taking place off site, such as visits, outings or field trips.

Ensure health and safety policies and risk assessments are inclusive of the needs of pupils with asthma.

Make sure the asthma policy is effectively monitored and regularly updated.

Provide indemnity for teachers who volunteer to administer medicine to pupils with asthma.

This school's head teacher has a responsibility to:

Ensure the school is inclusive and welcoming and that the asthma policy is in line with local and national guidance and policy frameworks.

Liaise between interested parties -including pupils, school staff, SEN coordinators, welfare assistants, teaching assistants, school nurses, parents, governors, the school health service the local authority transport service and local emergency care services.

Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils individual health plans.

Ensure pupil confidentiality.

Assess the training and development needs of staff and arrange for them to be met.

Ensure all supply teachers and new staff know the asthma policy.

Delegate a staff member to check the expiry date of medicines kept at school and maintain the school asthma register.

Monitor and review the policy at least once a year, with input from staff and external stakeholders.

All staff at this school has a responsibility to:

Be aware of the potential triggers, signs and symptoms of asthma and know what to do in an emergency

Understand the school's asthma policy.

Know which pupils have asthma and be familiar with the content of their individual health plan.

Allow all pupils to have immediate access to their emergency medicines.

Maintain effective communication with parents including informing them if their child has been unwell at school.

Be aware that long term conditions can affect a pupil's learning and provide extra help when pupils need it.

Be aware of pupils with asthma who may be experiencing bullying or need extra social support.

Liaise with parents, the child's healthcare professionals, special educational needs coordinator and welfare officers if a child is falling behind with their work because of their condition.

Use opportunities such as PSHE to raise pupil awareness about asthma.

Understand asthma and the impact it can have on pupils. (Pupils should not be forced to take part in activity if they feel unwell).

Ensure all pupils with asthma are not excluded from activities they wish to take part in.

Ensure pupils have the appropriate medicines with them during activity or exercise and are allowed to take it when needed.

The local healthcare team have a responsibility to:

Help update the school's asthma policy

Help provide regular training for school staff in managing asthma at school

Provide information about where the school can access training in areas that the school nurse has not had specialist training.

Provide support and information to the identified member of staff responsible for ensuring that parents complete the health care plans.

Individual doctors and specialist healthcare professionals caring for children who attend this school, have a responsibility to:

Help complete the school health plans provided by parents if appropriate.

Where possible and without compromising the best interests of the child, to try to prescribe medicines that can be taken outside of school hours.

Offer the parents of every child a written self-management plan to ensure parents and children know how they self manage at school and at home.

Ensure the child knows how to take their medicines effectively.

Ensure children have regular reviews of their condition and the medicines they take.

Provide the school with information and advice if a child in their care has severe asthma symptoms (with the consent of the pupil and their parents).

Understand and provide input to the school's medical condition policy.

The parents at this school have a responsibility to:

Tell the school if their child has asthma.

Provide an inhaler for use in school at all times

Ensure the school has a complete and up-to-date school healthcare plan for their child.

Inform the school about the medicines their child requires during school hours.

Inform the school of any medicines the child requires while taking part in visits, outings or field trips and other out-of-school activities such as school team sports.

Tell the school about any changes to their child's medicines, what they take and how much.

Inform the school of any changes to their child's condition.

Ensure their medicines and medical devices are labelled with their full name.

Ensure that their child's medicines are within their expiry dates.

Keep their child at home if they are not well enough to attend school.

Ensure their child catches up on any school work they have missed.

Ensure their child has regular reviews with their doctor or specialist healthcare professional.

Ensure their child has a written self-management plan from their doctor or specialist healthcare professional to help them manage their child's condition.